IMPAC COMPETITION WORKSHEET

SUPPLIERS NAME, ADDRESS, PHONE # 1 ITEM QTY U/P E/P U/P E/P U/P E/P DESCRIPTION Total ACCEPTS VISA (Y/N) DATE OF CALL POC BUSINESS SIZE (SM/LG) OPEN MARKET/GSA GOV'T DISCOUNT? IMMEDIATE SHIP? DELIVERY DATE SHIPPING CHARGE INCL?

REMARKS:

TAX EXEMPT